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Form 990-T

EXTENDED TO MAY 15, 2020
Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No 1545-0687

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

D Employer identification number (Employees' trust, see instructions)

B Exempt under section
[X] 501(c)(3)
[] 408(e) [] 220(e)
[] 408A [] 530(a)
[] 529(a)

Print or Type

CHI CENTER, INC.

52-0623695

Number, street, and room or suite no. If a P.O. box, see instructions.

10501 NEW HAMPSHIRE AVE

E Unrelated business activity code (See instructions)

City or town, state or province, country, and ZIP or foreign postal code

SILVER SPRING, MD 20903

531110

C Book value of all assets at end of year 9,497,290.

F Group exemption number (See instructions.)

G Check organization type [X] 501(c) corporation [] 501(c) trust [] 401(a) trust [] Other trust

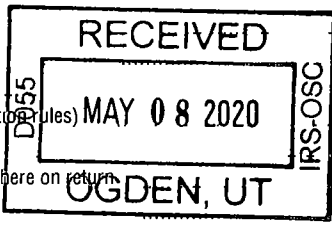
H Enter the number of the organization's unrelated trades or businesses. 1 Describe the only (or first) unrelated trade or business here REAL PROPERTY RENTAL

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? [] Yes [X] No

J The books are in care of DAPHNE PALLOZZI Telephone number 301-445-3350

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Less returns and allowances, Cost of goods sold, etc.

Table with 2 columns: Part II Deductions Not Taken Elsewhere, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Salaries and wages, Repairs and maintenance, etc.



SCANNED FEB 03 2021

Part III Total Unreported Business Taxable Income
33 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 31 -3,319.
34 Amounts paid for depreciation (see instructions) 31 0.
35 Deduction for out-of-pocket costs arising in any year beginning before January 1, 2018 (see instructions) STMT 2 0.
36 Total of unrelated business taxable income before special deductions. Subtract line 35 from the sum of lines 33 and 34 31 -3,319.
37 Specific deduction (generally 50,000, but see line 37 instructions for restrictions) 38 1,000.
38 Charitable deduction (see instructions). Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36 39 -3,319.

Part IV Tax Computation
39 Organization taxable as a corporation. Multiply line 38 by 21% (21%) 39 0.
40 Franchise tax or other taxes. See instructions for tax computation. Amount for all are entered on line 39.
41 Tax on this schedule or Schedule D (Form 990-T) 40 0.
42 Priority tax. See instructions 41 0.
43 Alternative minimum tax (see instructions) 42 0.
44 Tax on nonexempt facility income. See instructions 43 0.
45 Total tax. Add lines 39, 41, 42, and 43 to line 39 or 43, whichever applies 44 0.

Part V Tax and Payments
45 Foreign tax credit (corporations attach Form 1120; trusts attach Form 1120-FT) 45 0.
46 Other credits (see instructions) 46 0.
47 General business credit. Attach Form 3820 47 0.
48 Credit for prior year minimum tax (attach Form 9821 or 9822) 48 0.
49 Total credits. Add lines 45 through 48 49 0.
50 Deductions 49a from line 44 50 0.
51 Other taxes. Check if trust: Form 4230 Form 9611 Form 990-SS Form 990-B Form 990-E Form 990-T Other (see instructions) 51 0.
52 Total tax. Add lines 49 and 47 (see instructions) 52 0.
53 2018 net PEs tax liability paid from Form 925-A or Form 925-B, Part II, amount (S), line 2 53 0.
54 a Payments. A 2017 overpayment credited to 2018 54a 0.
54 b 2018 estimated tax payments 54b 0.
54 c Tax deposited with Form 990-T 54c 0.
54 d Foreign corporation tax paid or withheld at source (see instructions) 54d 0.
54 e Backup withholding (see instructions) 54e 0.
54 f Credit for small employer health insurance premiums (attach Form 9948) 54f 0.
54 g Other credits, adjustments, and payments: Form 4320 Other 54g 0.
55 Total payments. Add lines 54a through 54g 55 0.
56 Estimated tax penalty (see instructions). Check if Form 2220 is attached 56 0.
57 Tax due. If line 55 is less than the total of lines 49, 51, and 52, enter amount due 57 0.
58 Overpayment. If line 55 is larger than the total of lines 49, 51, and 52, enter amount overpaid 58 0.
59 Enter the amount of line 57 you want credited to 2019 (or next year) 59 0.

Part VI Statements Regarding Certain Activities and Other Information
64 At any time during the 2018 calendar year, did the organization have an interest in or a dependent or other activity over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization also must file Form 990-T, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country: Yes X No
65 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Yes X No

Sign Here
Name of officer: Eric P. Siegfried, Date: 04/28/20, Title: PRESIDENT
Preparer: Eric P. Siegfried, CPA, Date: 04/28/20, Preparer's signature: Eric P. Siegfried, Date: 04/28/20, Preparer's title: CPA, Preparer's address: 888 BESTGATE ROAD, SUITE 310, ANNAPOLIS, MD 21401, Phone no: 410-224-4970

Part III Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33 -3,319.
34	Amounts paid for disallowed fringes	34
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 2	35 0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36 -3,319.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37 1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38 -3,319.

Part IV Tax Computation		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39 0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40
41	Proxy tax. See instructions	41
42	Alternative minimum tax (trusts only)	42
43	Tax on Noncompliant Facility Income. See instructions	43
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44 0.

Part V Tax and Payments		
45a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	45a
b	Other credits (see instructions)	45b
c	General business credit. Attach Form 3800	45c
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d
e	Total credits. Add lines 45a through 45d	45e
46	Subtract line 45e from line 44	46 0.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47
48	Total tax. Add lines 46 and 47 (see instructions)	48 0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49 0.
50a	Payments: A 2017 overpayment credited to 2018	50a
b	2018 estimated tax payments	50b
c	Tax deposited with Form 8868	50c
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d
e	Backup withholding (see instructions)	50e
f	Credit for small employer health insurance premiums (attach Form 8941)	50f
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	50g
51	Total payments. Add lines 50a through 50g	51
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	55

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.	<input type="checkbox"/> <input checked="" type="checkbox"/>
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: _____ Date: _____ Title: **PRESIDENT**

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only	Print/Type preparer's name ERIC P. SIEGFRIED, CPA	Preparer's signature ERIC P. SIEGFRIED, CPA	Date 04/28/20	Check <input type="checkbox"/> if self-employed	PTIN P01278242
	Firm's name MULLEN, SONDBERG, WIMBISH & STONE, PA			Firm's EIN 52-1197902	
	Firm's address 888 BESTGATE ROAD, SUITE 310 ANNAPOLIS, MD 21401			Phone no. 410-224-4920	

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					
4b	Other costs (attach schedule)	4b					
5	Total. Add lines 1 through 4b	5					

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **0.**

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule) STATEMENT 3	(b) Other deductions (attach schedule) STATEMENT 4	
(1) JONES CENTER	106,455.	40,919.	71,826.	
(2) RESIDENTIAL - COLLINGWOOD	16,100.	4,523.	13,074.	
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 5	5. Average adjusted basis of or allocable to debt-financed property (attach schedule) STATEMENT 6	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) 547,094.	1,758,357.	31.11 %	33,118.	35,075.
(2) 264,199.	290,398.	90.98 %	14,648.	16,010.
(3)		%		
(4)		%		
Totals			47,766.	51,085.
Total dividends-received deductions included in column 8				0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
Totals			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)	
			0.	0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26
		0.	0.			0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FOOTNOTES

STATEMENT 1

ACTIVITY NO. 1:

547,094 AVERAGE ACQUISITION INDEBTEDNESS IS CALCULATED BASED ON BEGINNING DEBT BALANCE AT 7/1/18 OF 554,035 AND ENDING DEBT BALANCE AT 6/30/19 OF 540,153.

1,758,357 AVERAGE ADJUSTED BASIS IS CALCULATED BASED ON BEGINNING ADJUSTED BASIS AT 7/1/18 OF 1,778,816 AND ENDING ADJUSTED BASIS AT 6/30/19 OF 1,737,897.

ACTIVIY NO. 2:

264,199 AVERAGE ACQUISITION INDEBTENESS IS CALCULATED BASED ON BEGINNING DEBT BALANCE AT 7/1/18 OF 267,551 AND ENDING DEBT BALANCE AT 6/30/19 OF 260,847.

290,398 AVERAGE ADJUSTED BASIS IS CALCULATED BASED ON BEGINNING ADJUSTED BASIS AT 7/1/18 OF 292,659 AND ENDING ADJUSTED BASIS AT 6/30/19 OF 288,136.

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 2

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/10	35,779.	35,779.	0.	0.
06/30/11	6,545.	6,545.	0.	0.
06/30/13	11,294.	2,675.	8,619.	8,619.
06/30/14	4,066.	0.	4,066.	4,066.
06/30/17	1,336.	0.	1,336.	1,336.
NOL CARRYOVER AVAILABLE THIS YEAR			14,021.	14,021.

FORM 990-T SCHEDULE E - DEPRECIATION DEDUCTION STATEMENT 3

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		40,919.	
- SUBTOTAL -	1		40,919.
DEPRECIATION		4,523.	
- SUBTOTAL -	2		4,523.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(A)			45,442.

FORM 990-T

SCHEDULE E - OTHER DEDUCTIONS

STATEMENT 4

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
REPAIRS AND MAINTENANCE		22,322.	
OCCUPANCY		19,033.	
INTEREST		27,074.	
INSURANCE		3,397.	
- SUBTOTAL -	1		71,826.
REPAIRS AND MAINTENANCE			
INTEREST		13,074.	
- SUBTOTAL -	2		13,074.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(B)			84,900.

FORM 990-T AVERAGE ACQUISITION DEBT ON OR STATEMENT 5
 ALLOCABLE TO DEBT-FINANCED PROPERTY

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
AVERAGE DEBT BASIS		547,094.	
- SUBTOTAL -	1		547,094.
AVERAGE DEBT BASIS		264,199.	
- SUBTOTAL -	2		264,199.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 4			811,293.

FORM 990-T

AVERAGE ADJUSTED BASIS OF OR
ALLOCABLE TO DEBT-FINANCED PROPERTY

STATEMENT 6

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
AVERAGE PROPERTY BASIS		1,758,357.	
- SUBTOTAL -	1		1,758,357.
AVERAGE PROPERTY BASIS		290,398.	
- SUBTOTAL -	2		290,398.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 5			2,048,755.